PLEASE PRINT

### STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

# RECEIVED

OCT 29 2018

NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobbyist(s) _arletan Sings	DEPARTMENT
II. Name of lobbyist's partnership, firm or corporation, is	fany:
United Corporation	
(Name of partnership, firm or corporation)	
6 Liberty Lave West Hampt	an NH 03842
Business Address: (Street) (Town/City)	(State) (Zip Code)
(663) 379-3848 ( )(Felephone)	c-mail Simpson ( Punite). Com
(Telephone) (F	ax)
III. This statement covers: (Choose one – file separate reportable expense transactions which are not attributab	ports for each client, OR you may file a separate report for
reportable expense transactions which are not an initial	ie to any out enemy.
All reportable transactions occurring in the months prior	to the reporting date relative to the following client:
( Chaile) Coconnetion	
(Full Name of Client as it appears on the	Lobbyist Registration Form)
<u>OR</u>	
☐ All reportable transactions by the lobbyist (including the unrelated to any particular client.	lobbyist's family), or the lobbying firm listed below which are
IV. Date of Report April 25, 2018	July 25, 2018 🛚
Reports cover: activity from date of registration to 3/31/18	activity from 4/1/18 to 6/30/18
October 31, 2018 X activity from 7/1/18 to 9/30/18	January 30, 2019 🗆
activity from .//1/18 to 9/30/18	activity from 10/1/18 to 12/31/18
V. There have been no fees received and no reporta If this box is checked, complete just this form and submit it to Concord, NH 03301.	ble transactions made since the last report.   o the Secretary of State's Office, State House, Room 204,
VI. Check if additional reports are attached:	
If you have received fees or made expenditures, you mu	
	, you must file Addendum B-Report of Honorariums or
Expense Reimbursement	tributions, you must file Addendum C- Political Contributions
<u> </u>	
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 an approximate to the best of my knowledge and belief.	d hereby swear or affirm that the foregoing information is true
The point to the observe my service and solds.	10/20/2018
(Signature of Inhavist)	(Date)
CIA + C.	
(Print Name of lobbyist)	

## STATE OF NEW HAMPSHIRE

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### Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Carleton Simpson	
II. Name of lobbyist's partnership, firm or corporation, if any:	
Unital Corporation	
(Name of partnership, firm or corporation)  III. Name of Client Uail Coperation	Date 10/29/2018
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The greeduced by any expenses:	relations, or public relations service
a) Total of all fees received in this reporting period	a)s 91000
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)	b) \$ 9,000
c) Total of all fees received to date (Add lines a and b)	0)\$ 27,000
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report of Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of lebeing lobbied, purchase of a ceremonial object given to a person being lobbie (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made to may be filed for the lobbyist(s)/firm aggregate total of all expenses parxpenses; (b) the aggregate total of all expenses; (c) the aggregate total of a le: meals purchased during a business than \$10 that is given to the person divided with a value of \$25.00 or less); are orting period of greater than \$25.00 file of greater than \$25, purchase of er than \$25, but not greater than \$5, expense reimbursement, or politic
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$ 2,400
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$
c) Total of all itemized expenditures reported in detail in section VI.	c) \$.

d) Total expenses for this reporting period (Add lines a, b and c)	d)s 12,480
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	c) \$ 24, 960
f) Total of all expenses year to date	ns <u>37,440</u>
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affir	m that the foregoing information
(Signature of lobbyist)	6/29/2018 (Date)
(Print Name of lobbyist)	

STATE OF NEW HAMPSHIRE
Lobbyists Report of
Political Contributions Addendum C (RSA Chapter 15:6)

I. Name of Lobbyist(s)	m - 1 db - 5	n N <sup>e</sup> raliana	
I. Name of Lobbyist(s)	ar icion c	Digison	
II. Name of lobbyist's parti	<b>-</b> ·	- ' ',	72
Unity Carpor	atim		
(Name of partne	ership, firm or corporation)	4 - "	Edan Carre
III. Name of Client Um	1 Corpora	no~	Date(O[29/72)X 8
Political Contributions For each political contributi client/lobbyist and lobbying	on that is reportable	pursuant to RSA Chapte ollowing:	
			स्मृति स्थल का आकर साह
Full name of candidate:	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$	00.00	Office Candidate is	Seeking Governer
Full name of candidate:			
-	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$		Office Candidate is	Seeking
If the contribution is an in-kin actual cost of the in-kind cont enter an estimated value and t	ribution on the line ab	e a description of the goods ove for amount of contribut	s or services provided, and enter the tion. If the actual cost is not known,
Full name of candidate:	· · · · · · · · · · · · · · · · · · ·	<u> </u>	
	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$		Office Candidate is	Seeking

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."
(If more than three contributions were made, report additional contributions on separate addendum C forms.)
Sworn Statement/Affirmation by Lobbyist
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief.  (Signature of lobbyist)  (Date)  (Print Name of lobbyist)

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## State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:
Name of Lobbying partnership, firm, or corporation: Unitil Conferction
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client): Unit for Corporation
Date of Report (check one):
April 25, 2018
I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendum submitted with that Statement (insert the number of Addendum forms being submitted):
Addendum A(s).
Addendum B(s).
Addendum C(s).
I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief.  (Signature of lobbyist)    10/29/2019   (Date)
Carleton B. Simpson (Print Name of lobbyist)